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smission ng deposited with the United irst class mail in an envelope s above, or being facsimile date indicated below. **ROCKVILLE, MD 20850** (Depositor's name (Signature (Date ATTORNEY DOCKET NO. CONFIRMATION NO. FIRST NAMED INVENTOR APPLICATION NO. **FILING DATE** PF112P1D2 4809 10/023.584 12/21/2001 Craig A. Rosen TITLE OF INVENTION: ANTIBODIES TO HUMAN VASCULAR ENDOTHELIAL GROWTH FACTOR 2 SMALL ENTITY ISSUE FEE **PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE APPLN. TYPE 07/13/2006 NO \$1400 \$300 \$1700 nonprovisional CLASS-SUBCLASS **EXAMINER ART UNIT** LANDSMAN, ROBERT S 1647 530-387100 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Sterne, Kessler, (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 2 Goldstein & Fox P.L.L.C. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Rockville, Maryland Human Genome Sciences, Inc. Please check the appropriate assignee category or categories (will not be printed on the patent): 🗖 Individual 🔯 Corporation or other private group entity 🗖 Government 4a. The following fec(s) are enclosed: 4b. Payment of Fee(s): Issue Fce A check in the amount of the fee(s) is enclosed. Dublication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0036. (enclose an extra copy of this form). Advance Order - # of Copies _ _ 5. Change in Entity Status (from status indicated above) ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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WRITER'S DIRECT NUMBER: (202) 772-8836 INTERNET ADDRESS: LBRANDES@SKGF.COM

Mail Stop Issue Fee

Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

Re:

Allowed U.S. Utility Patent Application

Appl. No. 10/023,584; Filed: December 21, 2001

For: Antibodies to Human Vascular Endothelial Growth Factor 2

Inventors:

Rosen et al.

Our Ref:

1488.100000Q/PAJ/LMB

Sir:

In response to the **Notice of Allowance and Fee(s) Due** dated April 13, 2006, the following documents are forwarded for appropriate action by the U.S. Patent and Trademark Office:

- 1. Issue Fee Transmittal (Form PTOL-85B);
- Credit Card Payment Form (PTO-2038) for \$1,709.00 to cover:
 \$1,400.00 Issue Fee;
 \$9.00 Advance copies of patent;
 \$300.00 Publication Fee; and
- 3. One return postcard.

It is respectfully requested that the attached postcard be stamped with the date of filing of these documents, and that it be returned to our courier.

Sterne, Kessler, Goldstein & Fox PLLC.: 1100 New York Avenue, NW: Washington, DC 20005: 202.371.2600 f 202.371.2540: www.skgf.com

Commissioner for Patents July 13, 2006 Page 2

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The U.S. Patent and Trademark Office is hereby authorized to charge any fee deficiency, or credit any overpayment, to our Deposit Account No. 19-0036.

Respectfully submitted,

STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C.

Lin M. Blander

Lori M. Brandes

Agent for Applicants

Registration No. 57,772

PAJ/LMB/eaf Enclosures

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